

SERFF Tracking Number: ELAS-125706247 State: Arkansas
 Filing Company: AXA Equitable Life Insurance Company State Tracking Number: 39378
 Company Tracking Number:
 TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other
 Product Name: LTC Replacement and Lapse Reporting Form-AXAEQ
 Project Name/Number: LTC Replacement and Lapse Reporting Form-Informational Filing/NAIC 641-1 APPENDIX G

Filing at a Glance

Company: AXA Equitable Life Insurance Company

Product Name: LTC Replacement and Lapse Reporting Form-AXAEQ
 SERFF Tr Num: ELAS-125706247 State: ArkansasLH

TOI: LTC06 Long Term Care - Other	SERFF Status: Closed	State Tr Num: 39378
Sub-TOI: LTC06.000 Long Term Care - Other	Co Tr Num:	State Status: Filed-Closed
Filing Type: Form	Co Status:	Reviewer(s): Harris Shearer
	Authors: Audrey Arnold, Samra Mekbeb, Roxanne Persaud, Sabrena Lallmohamed	Disposition Date: 07/16/2008
	Date Submitted: 06/23/2008	Disposition Status: Filed-Closed
Implementation Date Requested:		Implementation Date:

State Filing Description:

General Information

Project Name: LTC Replacement and Lapse Reporting Form-Informational Filing

Project Number: NAIC 641-1 APPENDIX G

Requested Filing Mode: Informational

Explanation for Combination/Other:

Submission Type: New Submission

Overall Rate Impact:

Filing Status Changed: 07/16/2008

State Status Changed: 07/16/2008

Corresponding Filing Tracking Number:

Filing Description:

Status of Filing in Domicile: Pending

Date Approved in Domicile:

Domicile Status Comments:

Market Type: Individual

Group Market Size:

Group Market Type:

Deemer Date:

Estella A.Devian

Telephone (212) 314-2921

facsimile (212) 707-7493

estella.devian@axa-equitable.com

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VIA SERFF

June 23, 2008

The Honorable, Mike Pickens
Insurance Commissioner
Arkansas Department of Insurance
1200 West Third Street
Little Rock, AR 72201-1904

Re: AXA Equitable Life Insurance Company (AXAEQ)
NAIC No.: 968-62944 FEIN No.: 13-5570651
Long Term Care Lapse and Replacement Reporting Form ("Reporting Form")
SERFF Tracking Number: ELAS-125706247

Dear Commissioner:

On behalf of AXA EQ, I am filing the above-referenced form. AXA EQ had no lapses or replacements of its Long Term Care Rider in your state for the year ending December 31, 2007.

We note that the information required in the Reporting Form appears to be applicable to individual stand-alone long term care policies, and not to long term care riders that are attached to life insurance policies. AXA EQ Long Term Care Rider is not a stand-alone policy. It is a rider that it is attached to a life insurance policy. Therefore, we would like to obtain clarification from the Department regarding the filing requirements of the Reporting Form. Please advise us whether AXA EQ is required to file this report in the future. If so, is AXA EQ required to file the form when there are no lapses or replacements for the year?

Please call me collect at the above number if you have any questions or need additional information regarding this filing.

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Sincerely,

Estella Devian
 Vice President

Company and Contact

Filing Contact Information

Estella A. Devian, Vice President
 1290 Avenue of the Americas, 14th Floor
 New York, NY 10104
 estella.devian@axa-financial.com
 (212) 314-2921 [Phone]
 (212) 707-7493[FAX]

Filing Company Information

AXA Equitable Life Insurance Company
 1290 Avenue of the Americas, 14-10
 New York,, NY 10104
 (212) 314-2921 ext. [Phone]
 CoCode: 62944
 Group Code: 968
 Group Name:
 FEIN Number: 13-5570651
 State of Domicile: New York
 Company Type: LIFE Insurance
 State ID Number:

Filing Fees

Fee Required? No
 Retaliatory? No
 Fee Explanation:
 Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
AXA Equitable Life Insurance Company	\$0.00	06/23/2008	

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Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Filed-Closed	Rosalind Minor (FM)	07/16/2008	07/16/2008

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Disposition

Disposition Date: 07/16/2008

Implementation Date:

Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: ELAS-125706247 State: Arkansas

Filing Company: AXA Equitable Life Insurance Company State Tracking Number: 39378

Company Tracking Number:

TOI: LTC06 Long Term Care - Other Sub-TOI: LTC06.000 Long Term Care - Other

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Item Type	Item Name	Item Status	Public Access
Supporting Document	Certification/Notice	Filed-Closed	Yes
Supporting Document	Application	Filed-Closed	Yes
Supporting Document	Health - Actuarial Justification	Filed-Closed	Yes
Supporting Document	Outline of Coverage	Filed-Closed	Yes
Supporting Document	Long Term Care Insurance Replacement and Lapse Reporting Form	Filed-Closed	Yes

<i>SERFF Tracking Number:</i>	<i>ELAS-125706247</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>AXA Equitable Life Insurance Company</i>	<i>State Tracking Number:</i>	<i>39378</i>
<i>Company Tracking Number:</i>			
<i>TOI:</i>	<i>LTC06 Long Term Care - Other</i>	<i>Sub-TOI:</i>	<i>LTC06.000 Long Term Care - Other</i>
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Rate Information

Rate data does NOT apply to filing.

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Supporting Document Schedules

Bypassed -Name:	Certification/Notice	Review Status:	
Bypass Reason:	N/A	Filed-Closed	07/16/2008
Comments:			

Bypassed -Name:	Application	Review Status:	
Bypass Reason:	N/A	Filed-Closed	07/16/2008
Comments:			

Bypassed -Name:	Health - Actuarial Justification	Review Status:	
Bypass Reason:	N/A	Filed-Closed	07/16/2008
Comments:			

Bypassed -Name:	Outline of Coverage	Review Status:	
Bypass Reason:	N/A	Filed-Closed	07/16/2008
Comments:			

Satisfied -Name:	Long Term Care Insurance	Review Status:	
	Replacement and Lapse Reporting	Filed-Closed	07/16/2008
	Form		

Comments:
See attached.

Attachment:
NAIC - Replacement and Lapse Reporting Form-AXAEQ-AR.pdf

APPENDIX G

Long-Term Care Insurance

Replacement and Lapse Reporting Form

For the State of ARKANSAS

Company Name: AXA EQUITABLE LIFE INSURANCE COMPANY

Company Address: 1290 AVENUE OF AMERICAS, NEW YORK, NY 10104

Contact Person: ESTELLA A. DEVIAN

For the Reporting Year of 2007

Due: June 30 annually

Company NAIC Number: 968-62944

Phone Number: (212) 314-2921

Instructions

The purpose of this form is to report on statewide basis information regarding long-term care insurance policy replacements and lapses. Specifically, every insurer shall maintain records for each agent on that agent's amount of long-term care insurance replacement sales as a percent of the agent's total annual sales and the amount of lapses of long-term care insurance policies sold by the agent as a percent of the agent's total annual sales. The tables below should be used to report the ten percent (10%) of the insurer's agents with the greatest percentages of replacements and lapses.

Listing of the 10% of Agents with the Greatest Percentage of Replacements

Agent's Name	Number of Policies Sold By This Agent	Number of Policies Replaced By This Agent	Number of Replacements As % of Number Sold By This Agent
N/A	N/A	N/A	N/A

Listing of the 10% of Agents with the Greatest Percentage of Lapses

Agent's Name	Number of Policies Sold By This Agent	Number of Policies Lapsed By This Agent	Number of Lapses As % of Number Sold By This Agent
N/A	N/A	N/A	N/A

Company Totals

Percentage of Replacement Policies Sold to Total Annual Sales **N/A** %

Percentage of Replacement Policies Sold to Policies In Force (as of the end of the preceding calendar year) **N/A** %

Percentage of Lapsed Policies to Total Annual Sales **N/A** %

Percentage of Lapsed Policies to Policies In Force (as of the end of the preceding calendar year) **N/A** %